



# **Automated Stroke Detection To Improve Hospital Outcomes**

**Eric Corkhill**

**610.220.2064**

**[corkhill@neuralerttechnologies.com](mailto:corkhill@neuralerttechnologies.com)**

# In-hospital Strokes are a big problem



**#1**

**Cause of severe, long term disability**



**10%**

**Happen in the hospital**



**50%**

**Aren't detected within 4.5 hours**



**27%**

**Die**

# In-hospital strokes have worse outcomes

## The Reasons

- Procedures increase stroke risk and severity
- Bed bound and sedation obscures symptoms
- Staff unable to perform consistent and timely checks

## The Results

- Strokes detected too late for effective treatment
- Increased LOS, morbidity & mortality adds cost
- Litigation settlement exceeds \$1.8M per event

# Neuralert

Non-invasive, wearable devices automatically detect stroke symptoms

Immediately alerts hospital staff to speed treatment

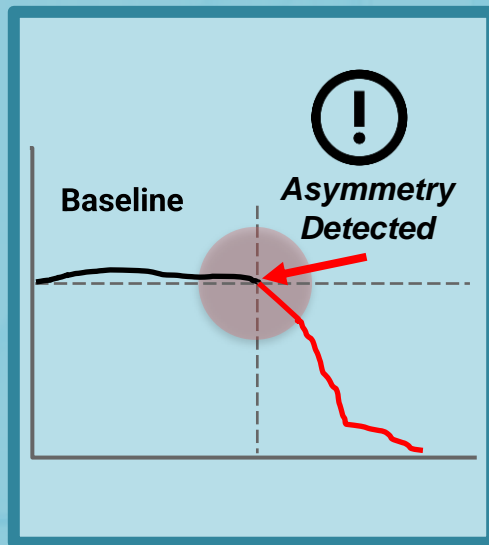
Neuralert saves lives, improves outcomes, and reduces cost and risk



# Rapid detection and alerting of stroke symptoms



Neuralert devices  
monitor asymmetrical  
arm movements



Proprietary algorithm  
determines stroke  
likelihood



Alerts enable rapid  
response and  
treatment

# “Secret Sauce” is unique algorithm



**Accelerometer data indicates  
Asymmetry**

Detecting stroke from  
accelerometer data is hard

## Confounding factors affecting data interpretation

- Dominant hand
- Sedation levels
- Sleep vs. awake
- Phone/device usage
- Eating meals
- Patient fidgeting with device
- Patient visitation
- Patient activities
- Limb restraints
- Placement on arms
- Catheter placements
- Telemetry wires
- Vital sign monitoring
- Medical interventions
- Bed and patient position
- Inter-patient movement
- Intra-patient movement

**Parameter-invariant  
Algorithm\***

Models and removes the effects  
of confounding factors from  
accelerometer data

## Current Performance

- ❖ 82% detection rate within 1 hour
- ❖ <5 false alarms/day

\*Exclusive license from Univ of Penn

\*Patent pending

# Neuralert vs. Standard of Care

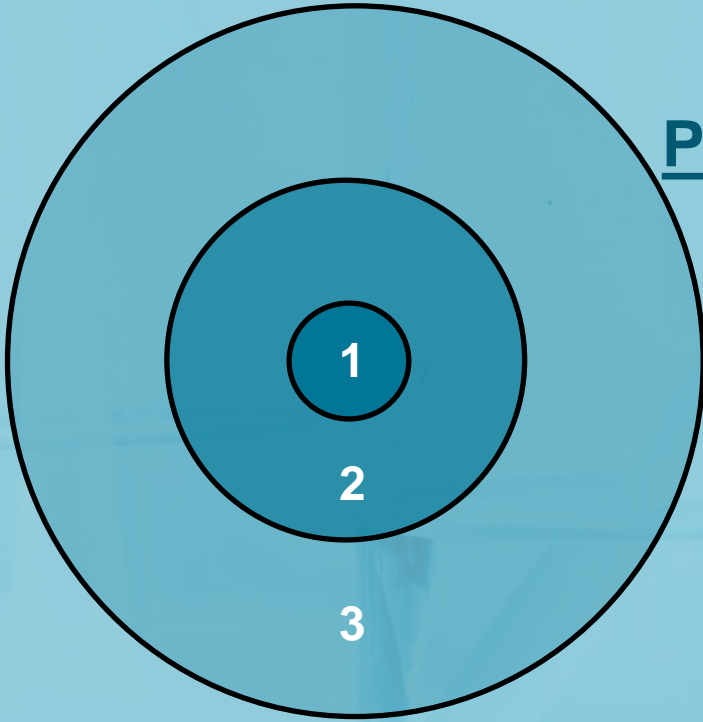


Neuralert detects **>80%** of ischemic strokes in less than **1 hour**



Less than **50%** of hospital strokes are currently identified within **4.5 hours**

# Market: Acute care, high stroke risk patients



## Primary Target

Medical Centers specializing in high risk Cardiovascular and Neurological procedures

## Expansion

Monitor all patients with elevated risk of stroke

## Downstream

Non-acute care  
International  
Consumer product



# Hybrid SaaS model



**Recurring Service Fee +  
Smart Bands**

**Hybrid  
SaaS pricing**

- \$5,000 annual SaaS seat license fee
- \$200 per pair reusable Smart Bands

**Per  
patient cost**

**\$130\***

**Reduced  
hospital cost**

**\* Assumes 40 patients/seat/year**

- \$2,000 per day
- 2 – 28 additional days

# Sizable target with significant growth potential

**\$197M**

**Target**

**Hospitals performing high  
stroke risk procedures**

(1.7M procedures - 10% overlap X \$5,000 SaaS  
÷ (40 patients per annual \$5,000 seat fee) +  
\$200 per pair of Smart Bands

**\$1.9B**

**Expansion\***

**Elevated stroke risk and  
elderly**

(15.6M patients X 5% Admit rate)  
+ (12.8M 65+ Admits) X 25% over  
lap ÷ (40 patients per annual  
\$5,000 seat fee)

\* US/Acute Care only

# Competitive Landscape

## Limited competitors

Asymmetry based stroke detection



- Incubator status
- Relies solely on machine learning/AI
- Focused on Rehab and SNF Markets

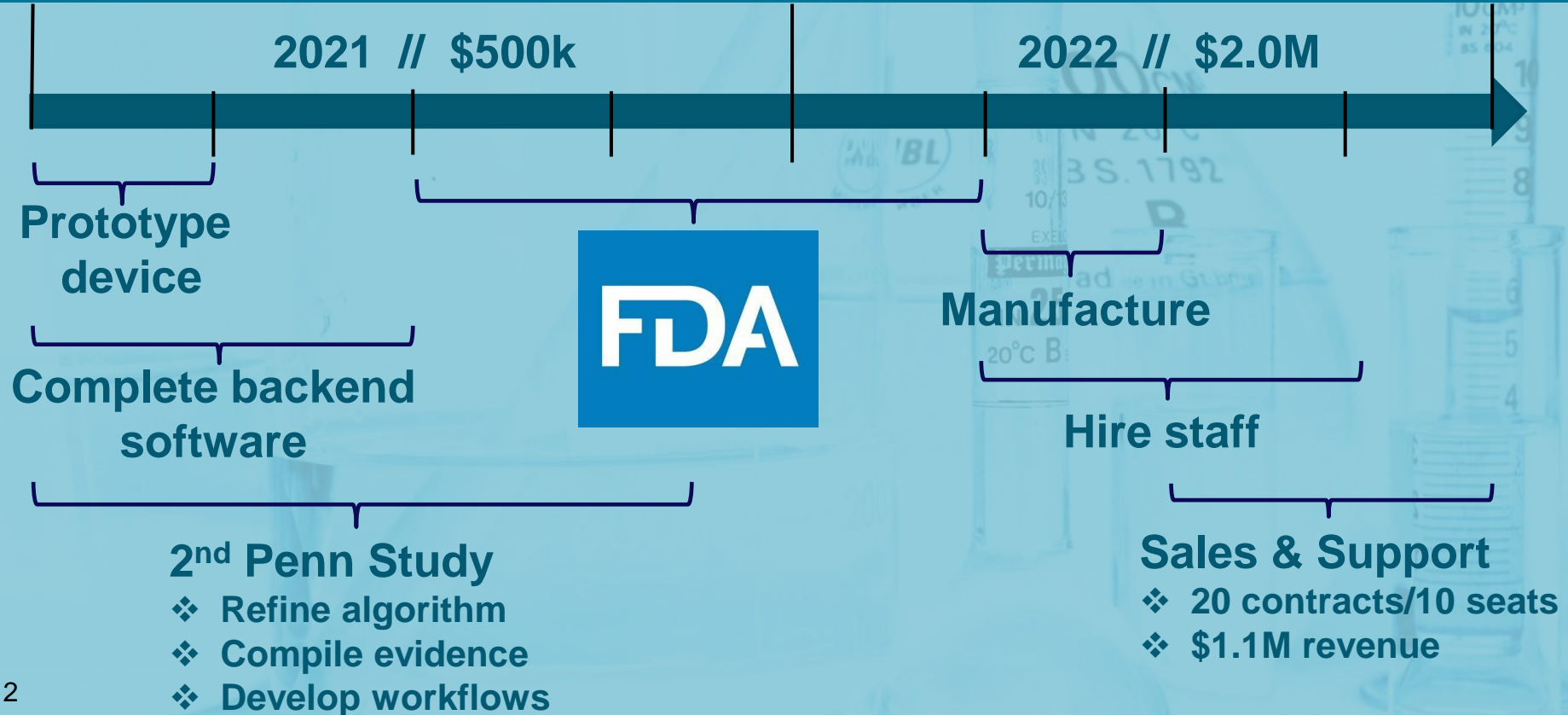
## Multiple partners

Diagnosing and Treating Strokes



**Genentech**

# Path to profitability



# Experienced team, proven success



**Dr. Steven Messé**

**Co-founder**

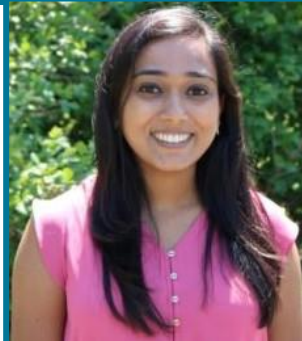
Professor, Dept of Neurology, Univ of Penn, Director of the Center for Neuro-Cardio Protection, Michael S. Pessin Stroke Leadership Award from American Academy of Neurology



**Dr. Jim Weimer**

**Co-founder**

Research Assistant Professor, Dept. of Computer and Information Science Univ of Penn, Dept. of Biomedical and Health Informatics, Children's Hospital of Philadelphia



**Bhavana Mohanraj**

**Advisor, Board Member**

Assistant Director, PCI Ventures managing a portfolio of life sciences startups. PhD in Bioengineering with medical device experience.



**Eric Corkhill**

**CEO**

40 year Health IT veteran focused on improving clinical decision making. Managed six prior startups resulting in five exits totaling \$500M



**Det Ansinn**

**CTO**

President and Founder, Brick Simple, LLC,. Extensive experience leading startup and Fortune 500 companies developing mobile and wearable healthcare technologies

# Funding Uses and Projections

## Funding to date & uses

**\$47,500 (Grants/Accelerator**

- AWS platform
- Band prototype
- FDA assistance

## Total raise needed

**\$2.5 - \$3.5 million**

- \$500k testing/building
- \$2.5 (FDA 510(k))
- \$3.5 (FDA De Novo)

## Exit possibilities

**#1 Medical Device (e.g. Medtronic)**

**#2 Consumer health (e.g. Apple)**

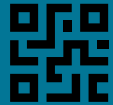
**#3 IPO**

Category / Year	2021	2022	2023	2024	2025
Seat Licenses	0	200	950	2000	3500
Income (mill)	\$0	\$1.08	\$5.13	\$16.20	\$35.10
COGS	\$.332	\$1.989	\$5.496	\$9.467	\$14.29
EBITDA	(\$.332)	(\$.909)	(\$.366)	\$6.73	\$20.81

# End in-hospital stroke devastation



**Big Problem**



**Innovative Technology**



**Significant Opportunity**



**Positive Landscape**



**Experienced Team**





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